

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000048861

FILED
Jul 18, 2007
Secretary of State

Entity Name: FLAGLER AVENUE BAR & GRILL, INC.

Current Principal Place of Business:

414 FLAGLER AVE.
NEW SMYRNA BEACH, FL 32169

New Principal Place of Business:

Current Mailing Address:

P O BOX 2339
NEW SMYRNA BEACH, FL 32169

New Mailing Address:

FEI Number: 59-3579186 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EVERSHED, JOHN
414 FLAGLER AVE.
NEW SMYRNA BEACH, FL 32169 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EVERSHED, JOHN
Address: 414 FLAGLER AVE.
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D () Delete
Name: BYERS, ROBERT
Address: 414 FLAGLER AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D () Delete
Name: BYERS, KATHLEEN
Address: 414 FLAGLER AVE
City-St-Zip: NEW SMYRNA BEACH, FL 32169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHLEEN BYERS

D

07/18/2007

Electronic Signature of Signing Officer or Director

_____ Date